

REQUEST FOR VERIFICATION OF BIDDER ELIGIBILITY

(Date)

Montana Department of Commerce
Community Development Division
301 South Park Avenue
PO Box 200523
Helena, MT 59620-0523

RE: TSEP Project # MT-TSEP-CG-_____

The (name of TSEP recipient: City, Town or County of _____) opened bids for the construction on the (name of project) on (date of bid opening) and would like clearance on the (lowest bidder or two lowest bidders). Please verify the eligibility of the following contractor(s) under the provisions of Section 18-2-432(2), MCA:

(Provide business name(s), name of owners (principals or partners), and business address)

Sincerely,

(signature)

TSEP Grant Administrator
Mailing Address
Telephone Number